

Spring 1990

NEWSPLETTER



Missouri
State

Board of
Nursing

Post Office Box 656
3524A North Ten Mile Drive
Jefferson City, MO 65102
(314) 751-0681

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Barbara Keay, L.P.N.	Member	06/01/92
Shael Lawson, L.P.N.	Member	06/01/89
Joyce Neaves, R.N.	Member	06/01/89
Walter Rarrick	Public Member	08/16/90
Barbara Schaffitzel, R.N.	Member	06/01/92

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NAME	TITLE
Florence Stillman, R.N.	Executive Director
Carol Hartigan Tharp, R.N.	Associate Executive Director
Melinda Sanders, R.N.	Discipline Coordinator
Vada Arrowood, R.N.	Nursing Education Coordinator

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Walt Miller	Investigator III
George Snodgrass	Investigator III
Pam Goose	Administrative Assistant
JoAnn Hanley	Secretary to Executive Director/Secretary III
Sallie Jacobs	Secretary to Discipline Coordinator/Secretary II
Liane Pierson	Secretary to Nursing Education Coordinator/Secretary II
Linda Strobel	Account Clerk
Lori Scheidt	Licensure Section Coordinator/Clerk Typist III
Sandy Sebastian	Complaints/Discipline Section Clerk/Clerk Typist II
Connie Clarkston	Licensure Section Clerk/Clerk Typist II
Roxanne Seymore	Receptionist/Clerk Typist II
Denise DeGeorge	Licensure Section Clerk/Clerk Typist II
Terry Conner	Licensure Section Clerk/Clerk Typist II
Pam Eiken	Licensure Section Clerk/Clerk Typist II

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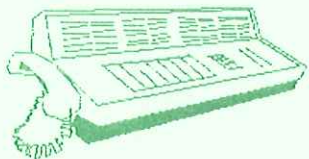
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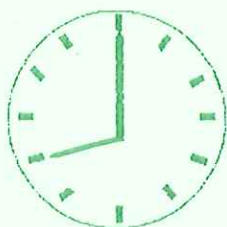
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Missouri State Board of Nursing

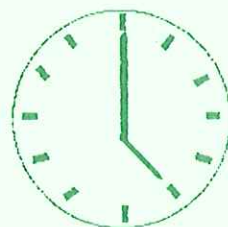


Main Telephone Number
(314) 751-0681

Administration	751-1416
Complaints & Discipline	751-6541
Education	751-0080
Examination	751-0681
Investigations	751-0070
I.V. Therapy	751-0080
Licensure	751-0681
Nursing Practice	751-1416
Purchasing	751-0072



Office Hours



Monday - Friday

8:00 a.m. - 5:00 p.m.

PHILOSOPHY FROM FLO
FLORENCE STILLMAN, R.N., M.S.N.
EXECUTIVE DIRECTOR

There is a movement afoot to centralize all of the services now provided by the licensing agencies in the Division of Professional Registration. This would include but not necessarily be limited to all licensing, investigations, meeting dates and arrangements, travel arrangements, administration of exams, vehicle control and I'm sure several other services known and unknown at this time. A similar situation now exists in Illinois, Washington State, New York and Florida. There are other states who are centralized but these listed come most readily to mind. Some of you may have experienced problems with services in these or other centralized states and thus understand specific problems inherent with that kind of service. I believe the movement is extremely bad for the Board of Nursing for the following reasons:

Centralization first and foremost can increase efficiency and services only to a point. When that point is exceeded then efficiency and services begin to decrease. The majority of the energy of the machine is then directed toward maintaining itself and the larger the machine the greater the amount of energy required for survival and maintenance. Efficiency and services decrease in direct proportion to the magnitude of the centralization effort. Example: Look at any federal government program - the paperwork, delays and the energy used to validate and maintain the program far outweigh in most instances the benefits which are derived from the money designated for that purpose. In other words, lots of maintenance but little service provided.

When applying this to the Board of Nursing we must look at the centralized services already supplied to us by the Division. Licensing has been centralized for several years. It has been and remains a very real nightmare for the staff of this Board. The central service group is always behind schedule in work. During renewal period the Board office staff spends days verifying licensure of nurses who have in fact paid for licenses that have not been issued by the Division. Each renewal period this office hires temporary staff because the renewal process is such that it requires a great deal of extra time to solve problems created by the centralized system.

Division Administration is attempting to issue all licenses for nineteen (19) (soon to be twenty-two) agencies. Among the bad effects of centralization are the depersonalization of services as evidenced in our current licensing process. The efficiency and concern for efficiency and service decreases when you take in money and issue licenses for a group with whom you have no contact and toward whom you feel little responsibility. In short, the angry phone calls for their mistakes come to our office, they refuse to take them and we cannot answer them because we do not have the information without calling the Division who has, as I have just stated, refused the calls. In the past when we have referred those calls to the Division, their basis for denial is that they have no time to take all those calls. We take the calls, call Division to try and find the answer then call the angry person to explain. The sense of responsibility is not the same if one is not made accountable for their actions. Boards all feel a greater sense of accountability to the members of the profession that they serve.

PHILOSOPHY FROM FLO CONTINUED

Centralization will certainly decrease that accountability for services as has been evidenced by the number of wrong licenses issued, that is, the number issued to people who should not receive them because of lapsed, inactive or disciplined status and the fact that we must spend a great deal of time every renewal period trying to keep all hospitals staffed with nurses who hold a current and valid license.

We are currently experiencing a nursing shortage and because of that have personalized our licensing process to try and endorse nurses into Missouri as rapidly as possible. With centralization personalized service would not occur. The Division every year renews approximately 270,000 licenses and personal attention to individual licenses and problems would not be possible. Individuals become a number and a case. Centralization would sufficiently inhibit that personalized process to the point of being of no assistance to nurses who wish to enter the state and go to work immediately.

The Division Director who is a political appointee and his professional staff change regularly and frequently. In the last five (5) years there have been four (4) Division Directors and one Acting Director. Each Division Director usually brings or hires his own professional staff. That frequency of turnover does not allow them to understand the licensing process or any other responsible major function of an agency at a depth that will allow them to make responsible major decisions for twenty-two Boards. Understanding the licensing law for one state agency is difficult and very time consuming. Quickly understanding laws for twenty-two agencies is a physical and mental impossibility.

Centralization and standardization of processes and procedures, go hand-in-hand. Standardization of all procedures for twenty-two (22) different Boards with different rules, regulations and laws is impossible; trying to centralize without understanding the agency/Board and the impact of changes made is impractical, senseless and insane. Because Administration is unstable in terms of tenure the wiser more responsible behavior is to leave as many services and procedures as possible with Board staff who are much more stable and who understand to a greater degree the practice laws and rules and regulations under which they function. The ramifications of changes can be more readily anticipated by Board staff who have experience and understanding of the laws and rules.

The 1990-1991 budget request for Division Administration includes appropriations for employees who will be used to establish a cashiers office. The intent is to open all incoming mail and process all money sending on any other enclosures to the individual Boards. We anticipate many problems with this system. I have registered our disagreement with the Division Director as have several other Executive Directors of licensing agencies in this Division, however the plan proceeds. We frequently receive from nurses multiple insertions in envelopes, we make some licensing decisions based on envelope postmarks and receive many pieces of confidential information by mail that could be lost in the process of transfer from cashier room to the Board office. The confidentiality of information received could more easily be breached and that breach very likely violently objected to. The more hands mail passes through the greater the possibility of error, loss of confidentiality and loss of important information.

PHILOSOPHY FROM FLO CONTINUED

In regard to centralization of investigations, we know from experience that investigators now respond more quickly to Board established priorities, the investigators are more accurately collecting information because they can concentrate on the needs and wishes of one Board. At the same time, cost per investigator hour has decreased because the amount paid by the Board to the Division for investigations always included financial support of the Administrations management personnel for that group.

To allow others the power to make important decisions in ones stead is abrogating the rights and responsibilities of the profession. At a time when nurses are declaring their belief in being professionals and are expressing a growing realization of the need to be characterized as professionals it becomes a particularly sensitive issue to then hear someone say, "Now, I will make decisions for you and will act in your behalf" - shade of "Big-Daddyism" - for the nursing profession a step backward!!

In collecting information from other centralized states the overwhelming majority dislike the centralized situation, there are several now moving away from centralization toward a more decentralized situation, and all say avoid it if at all possible. Theoretically there appears to be the potential for efficiency with possible decrease in cost and decrease in time expended but practically that potential does not come to fruition. There are actually vast increases in cost and great time lags in services are experienced. In the world of business (where the idea of centralization originated) centralization is on the wane. Lets not always lag behind as government is inclined to do, but lets take a lesson from those who are forced by profit statements and Boards of Directors to look closely at efficiency and effectiveness. We have no intention of producing a profit and are in fact constrained by law from doing so but we certainly are required to be responsive and answerable to members of the profession. The wise use of fees is evidenced by the expenditure of money in a cost effective and efficient manner within the requirements of the laws of the state and meeting the needs of the profession. Centralization cannot be described as fitting that description.

BOOKS OF CURRENT RNS AND LPNs

There are books available which list all Registered Professional Nurses and Licensed Practical Nurses currently licensed in the State of Missouri. Anyone wishing a copy of one of these books must send a letter of request to:

Missouri State Board of Nursing
P. O. Box 656
Jefferson City, MO 65102

The cost will be approximately \$22.50 for Registered Nurses and \$15.00 for Licensed Practical Nurses (cost subject to change). Send no money with letters of request; you will be billed at a later date.

OTHER STATE BOARDS OF NURSING TELEPHONE NUMBERS

ALABAMA -	205-261-4060	ALASKA -	908-561-2878
AMERICAN SAMOA -	684-633-1222	ARIZONA -	602-255-5092
ARKANSAS -	501-371-2751	CALIFORNIA -	
COLORADO -	303-894-2430	RN -	916-322-3350
CONNECTICUT -	203-566-1041	RN -	916-445-0793
D.C. -	202-727-7468	DELAWARE -	302-736-4522
GEORGIA -		FLORIDA -	904-359-6331
RN -	404-656-3943	GUAM -	671-734-2950
PN -	404-656-3921	HAWAII -	808-548-3086
IDAHO -	208-334-3110	ILLINOIS -	217-785-0800
INDIANA -	317-232-2960	IOWA -	515-281-3256
KANSAS -	913-296-4929	KENTUCKY -	502-897-5143
LOUISIANA -		MAINE -	207-289-5324
RN -	504-568-5464	MARYLAND -	301-764-4747
PN -	504-568-6480	MICHIGAN -	517-373-1600
MASSACHUSETTS -	617-727-7393	MISSISSIPPI -	601-359-6170
MINNESOTA -	612-642-0567	NEBRASKA -	402-471-2115
MONTANA -	406-444-4279	NEW HAMPSHIRE -	603-271-2323
NEVADA -	702-786-2778	NEW MEXICO -	505-841-8340
NEW JERSEY -	201-648-2570	NORTH CAROLINA -	919-782-3211
NEW YORK -	518-474-3843	N. MARIANA ISLANDS -	
NORTH DAKOTA -	701-224-2974	(0-11-670) 234-8950	
OHIO -	614-466-3947	OKLAHOMA -	405-525-2076
OREGON -	503-644-2767	PENNSYLVANIA -	717-787-8503
RHODE ISLAND -	401-277-2827	SOUTH CAROLINA -	803-253-6281
SOUTH DAKOTA -	605-335-4973	TENNESSEE -	615-367-2632

OTHER STATE BOARDS OF NURSING TELEPHONE NUMBERS

TEXAS -		UTAH -	801-530-6628
RN -	512-835-4880	VERMONT -	802-828-2396
PN -	512-835-2071		
VIRGIN ISLANDS -	809-776-7397	VIRGINIA -	804-662-9909
WASHINGTON -		WEST VIRGINIA -	
RN -	206-353-2206	RN -	304-348-3596
PN -	206-353-2807	PN -	304-348-3572
WISCONSIN -	608-266-3735	WYOMING -	307-777-7601

1990 DATES TO REMEMBER

BOARD MEETING DATES

JANUARY 8-12, 1990
APRIL 2-6, 1990
JUNE 18-22, 1990
OCTOBER 1-5, 1990

AGENDA DEADLINES

DECEMBER 18, 1989
MARCH 12, 1990
MAY 25, 1990
SEPTEMBER 10, 1990

EXAMINATION DATE(S)

FEBRUARY 6-7, 1990
APRIL 18, 1990
JULY 11-12, 1990
OCTOBER 16, 1990

TYPE

RN
LPN
RN
LPN

NCLEX DEADLINE

DECEMBER 12, 1989
FEBRUARY 21, 1990
MAY 16, 1990
AUGUST 21, 1990

BOARD DEADLINE

DECEMBER 22, 1989
MARCH 2, 1990
MAY 26, 1990
AUGUST 31, 1990

DIRECTIONS TO BOARD MEETINGS

East of the State via I-70

Exit at Kingdom City-Highway 54 West-State Capitol Exit.
Proceed on Highway 54 (you will cross the Missouri River Bridge).
Exit at the Highway 50 East Exit.
Proceed east on Highway 50 to the Broadway Street Exit and turn left.
* (See below)

West of the State via I-70

Exit at the Highway 63 South-Jefferson City Exit (in Columbia).
Proceed south on Highway 63.
Exit at the Highway 54 West Exit (will cross the Missouri River Bridge).
Exit at the Highway 50 East Exit.
Proceed east on Highway 50 to the Broadway Street Exit and turn left.
* (See below)

West of the State via Highway 50

Proceed east on Highway 50 to the Broadway Street Exit.
Turn right at the stop light onto Broadway.
* (See below)

East of the State via Highway 50

Proceed west on Highway 50 to the Broadway Street Exit.
Turn right at the stop light onto Broadway.
* (See below)

* NOTE

Continue on Broadway two (2) blocks to the corner of Broadway and High Streets. The Truman Building is on your left. The meeting is being held in Room 400. There is an Information Desk at each entrance, please ask for directions to Room 400.

Parking is very limited. Please allow additional time to search for parking. There are several parking lots and some on-street parking, but during business hours, they are usually occupied.

COMMENTS FROM CAROL, R.N., M.A.
ASSOCIATE EXECUTIVE DIRECTOR

Government defines the physical aspects of man by means of The Printed Form, so that for every man in the flesh there is an exactly corresponding man on paper.

Jean Giraudoux

Surprised, concerned, angered, emotionally distressed, disgusted, embarrassed, confused, disturbed, shocked, puzzled, offended, dissatisfied, poorly-served, appalled, alarmed, upset, astonished, boiling mad, resentful, dismayed, ripped-off, ashamed...

These comments reflect the feelings of Missouri nurses when they received their 1990-91 renewal licenses. The new license format was described by nurses as flimsy, sleazy, cheap, unreliable, simple to duplicate, unprofessional, a joke, a pitiful excuse for a professional license, an insult, degrading, unacceptable, unofficial, something produced on a home computer or typewriter, a sales gimmick, an invitation to forgery and imposters, a mistake, tacky, looks like a fake, a disgrace to the profession, a sign of lack of respect by nurses for nurses, less official than a library card, something that won't last a year, garbage, a raffle ticket appearance, something from a Cracker Jacks box, not authentic, gibberish, an obvious error, an affront, not durable, only one step up from Kleenex, only needs Ed McMahon's face added.

Hundreds of Missouri's approximately 55,000 RN's, the first group to renew, have taken the time to write to our office to express their opinions about the new license format. Over one thousand telephone calls of complaint have been received. Board members and Board staff have been questioned when representing the Board at professional meetings. This overwhelming reaction to something new was described by John C. Calhoun in 1850,

The interval between the decay of the old and the formation and the establishment of the new, constitutes a period of transition, which must always be one of uncertainty, confusion, error, and wild and fierce fanaticism.

Missouri nurses have displayed this "wild and fierce fanaticism" in their response to this year's license. And that's a good thing. While some might ask, "What's the big deal about something as insignificant as a license?", and tend to discount the furor, the nurses we have heard from have taken the position that their nursing licenses ARE a big deal, because they are a representative symbol of the profession. Some of the old "nurse symbols" of the past have disappeared in today's high-tech settings. Starched white uniforms and caps have become an anachronism in some nursing arenas. Many of our correspondents have referred to their annual license as evidence of their professional status, and are sorely displeased with this year's status symbol.

The response received from licensees is quite heartening. The letters and telephone calls received are an indication of the emerging assertiveness of nurses. Rather than complaining to one another at break, or saying nothing, and then feeling powerless, nurses have made their feelings known, not just complaining about what has happened, but also clearly stating their expectations that change must occur. Instead of feeling that it is futile to register complaint to a Dickensian bureaucracy which must surely be "skewered through and through with office pens and bound hand and foot with red tape", nurses have taken the initiative to voice their concerns and dissatisfaction.

COMMENTS FROM CAROL CONTINUED

Most regular readers of this Newsletter are already aware of the role of the Board of Nursing in the renewal process. However, the average licensee has minimal contact with the Board; we would appreciate it if those of you who are knowledgeable about the administrative workings of the Board could share this information with your staff nurses and other nurses with whom you come into contact. First, THE MISSOURI STATE BOARD OF NURSING HAS NOT PROCESSED RENEWAL LICENSES SINCE 1981. A change in statute in 1982 assigned the function of license renewal for all professional licensure agencies to the Division of Professional Registration. Division personnel send out renewal notices, receive the notices and fees in their offices, open returned notices, make name and address changes, deposit fees, and put information on the state computer system when a licensee has renewed. The Board of Nursing has no idea if a licensee has renewed until this information appears on the state computer system.

The administrative personnel of the Division of Professional Registration made the decisions concerning the type of paper the licenses would be printed on, as well as the decision that the wall certificate would be produced for all professions, regardless of their needs or desires. The Board of Nursing strongly opposed the printing of a wall certificate for nursing for a number of reasons. First, nurses are not required by law to post an annual wall certificate in their place of business, as are other professions such as Cosmetology, Healing Arts and Dentistry. The majority of nurses do not have offices. Because of the dangerous increase in forged and fraudulent licenses, the Board was concerned that the production of an essentially useless wall certificate in addition to the required license simply doubled the opportunities for individuals interested in fabricating evidence of nursing licensure. The Board of Nursing requested that the wall certificate not be produced; however, because of the Division's interest in standardizing all licensure forms regardless of need, the decision was made by the Division to produce a wall certificate for nurses. The Board of Nursing's objection was handled by inserting the thirtysomething "void" indicators into the language of the certificate. As Charles Wilson stated, "...what's good for General Motors is good for the country." So the license format is essentially an outgrowth of centralization and its naturally accompanying standardization.

We also heard from many nurses who seemed to believe that the \$16.00 renewal fee which they paid was totally used to produce the licensure document. In fact, the nursing annual renewal fees are deposited into the Board of Nursing fund. The fees from this fund are appropriated each year by the legislature to the Board of Nursing for the operational expenses of the Board. In other words, our renewal fees pay the salaries of the Board personnel, the rent of the office space, the equipment used by the staff, the expenses of Board members when they travel on Board business, the small Board member per diem allowance, and all other expenses incurred by the Board in carrying out their statutory mandates. All expenses must be approved by the legislature, in exactly the same way as if the Board was operating out of general revenue (tax) money, as most other state agencies do. The Board is audited periodically by the State Auditor, and the results of that audit are public information, as are the Board's annual budget requests. The Board also uses licensee fees to pay an annual transfer to the Division of Professional Registration for their operational expenses. These transfers are paid by all professional licensure boards, and are calculated on a per licensee basis. The Board of Nursing has the largest number of licensees, approximately 75,000, and therefore pays the largest transfer.

COMMENTS FROM CAROL
CONTINUED

So in essence, nurses are paying the salaries of the individuals who make the decisions about the format of their licenses, and as critical consumers of state services, have assertively voiced their concerns. And that says something good about Missouri's nurses. So keep those cards and letters coming in.

NOTICE TO NURSING PROGRAMS

Our office often receives telephone inquiries from Coordinators and Chairpersons of Missouri nursing programs asking for guidelines in dealing with an applicant to their program who has indicated a past history of a felony conviction, substance abuse, or other problem which could conceivably constitute grounds for refusal to issue a license under RSMo 335.066 (1) through (14). Inclusion of this portion of the statute in the school publication is a requirement for accreditation of schools in the Practical and Professional Minimum Standards. School directors express the desire to fully inform a potential student of all of the ramifications of this section of the statute and the possibility that the graduate would not be allowed to write the licensure examination. Program directors usually discuss with these applicants the procedures which the graduate will follow when making application for the licensure examination.

Until recently, when an applicant required Board approval, the Board offered that individual the opportunity to meet with them prior to voting. On September 1, 1989, the Board filed a proposed rule to eliminate these meetings. After the public comment period, during which no comments were received, the final order of rulemaking was filed and became effective on December 11, 1989. The Licensure Committee of the Board or the full Board may, at their discretion, request that an applicant meet with either group if the Board members feel that additional information which only a face-to-face meeting with the applicant would provide would assist the Board in deliberation. The applicant, of course, is under no obligation to meet with the Board if he or she does not desire to do so.

In the December 18, 1989 Missouri Register, the Board of Nursing filed a proposed rule which again affected applicants for licensure by examination. This rule stated in pertinent part:

An applicant for licensure by endorsement or licensure by examination who answers yes to one or more of the questions on the application which relate to possible grounds for denial of licensure under section 335.066, RSMo, shall submit copies of appropriate documents related to that answer before his/her application will be considered complete. The copies shall be certified if they are records of a court or administrative government agency.

Again, no comments were received during the public comment period. The final order of rulemaking was filed, and the rule became effective February 25, 1990.

Implications of these rule changes for Directors of nursing programs who are counseling applicants or students on what to expect in the examination application process are as follows:

1. Applicants should be advised that they may be asked to meet with the full Board or the Licensure Committee of the Board, but a meeting is not mandatory, and in most cases is not found to be necessary.
2. The applicants should allow themselves sufficient time to gather the required certified court documents. Court documents which the applicant would need to provide would consist of Information Complaint or Indictment sheets and the Judgment or other document showing disposition of the case. This might also be referred to as the Order of Probation. These court documents **MUST BE CERTIFIED**.
3. The applications will be reviewed by the Board staff for completeness before they are reviewed. Although the staff cannot anticipate every question which the Board may have, if staff feels

NOTICE TO NURSING PROGRAMS, CONTINUED

that additional information or documentation would be helpful to the members of the Board, they will contact the applicant for further data. In the case of an applicant with a present or past chemical dependency, it may be helpful for the school director or the applicant to call the Board office and speak with a staff member of the Discipline section. These staff members would be able to offer information on the types of documentation which the members of the Board have found to be helpful in similar cases.

4. Because of the time frame involved in submitting examination applications and scheduling Licensure Committee conference calls and/or meetings, and because the members of the Board may wish to meet with the applicant, there is the possibility that an applicant could be asked to come to Jefferson City to meet on rather short notice.

For further information regarding this process, please do not hesitate to call either Pam Groose, Administrative Assistant or Carol Hartigan Tharp, who are staff to the Licensure Committee of the Board.

VISIT WITH VADA
VADA E. ARROWOOD, R.N., M.S.Ed.
NURSING EDUCATION COORDINATOR

As it becomes more and more difficult to recruit nursing faculty who meet Minimum Standards' qualifications, the Board of Nursing is requested to consider persons who have less than the minimum educational and clinical specifications. There is a great deal of concern and controversy associated with nursing educators maintaining clinical skills, as well as, a diverse range within which nurse educators involve themselves with continuing clinical professional development. The paradigm ranges from laudable and creative methods of clinical participations; to absolutely no activity toward maintaining competence. The debate regarding the need for nurse educators to remain active in clinical practice may be discussed from an ethical perspective, a legal perspective, and or a practical perspective. The purpose of this article is to illuminate a few of those perspectives, as well as, present only a few of the ramifications of acquiring/maintaining faculty who can not demonstrate efforts to update clinical skills. In addition, each perspective has those with a differing viewpoint.

A related, yet different perspective of concern is when an appointment to a faculty position is extended to a person who acquired clinical experience several years ago and there is nothing that indicates that this person has kept pace with the changes occurring in nursing over the years. A third dimension is added when a faculty person has been in a position for fifteen years and has never updated skills beyond those activities which occur during a student's clinical experience. Students usually express their concern regarding clinical rotations where they seem to be more current than the faculty person who is their supervisor. This sometimes results in complaints expressed to the Board.

The shortage of qualified nurses for faculty positions is quickly becoming a nationwide situation. Schools who have replaced faculty recently will attest that the shortage is becoming more prevalent and often contributes to emergency situations which seem like a Catch 22; i.e. the clinical faculty/student ratio must be maintained and yet there often seems to be no one, who is qualified, interested in the position.

As I ponder the situation I find that I generate more conundrums than solutions. The definitive solutions are actually within the schools/programs, often expressed in the implementation of policies for professional development or in employment policies.

The question of clinical competency elicits a myriad of responses from school/program directors and faculty. I have compiled a selection of statements/questions/impressions that represent differing viewpoints for your consideration. Most of these opinions have been shared with me during school visits. Some have evolved from the frustrations expressed as programs attempt to appoint persons to their faculty who have the required clinical experience.

I PRESENT THE FOLLOWING FOR YOUR CONSIDERATION

- I. Does clinical supervision of students allow nurse educators to remain clinically current?

VISIT WITH VADA
CONTINUED

- A. the level of performance of nursing skills is directed toward the student, rather than that of the nurse educator and offers only an observational experience.

Differing viewpoint clinical rotations expose nurse educators to current approaches in patient care. There is no need for nurse educators to be an expert in the "state of the art" technology.

- B. the nurse educator is not actually performing the task, but rather observing the student's performance of the task.

Differing viewpoint basic nursing skills have not changed and practice of those skills is not necessary.

- C. the perspective of the nurse educator is from a higher educational level than that of the student. The student expects their supervisors to be role models.

- D. basic nursing education is unable to include all of the technological advances being made in health care, thus, the nurse educator is limited to the supervision of entry level skills.

Differing viewpoint it is impossible to remain technologically current. A staff person can usually provide insight for both the nurse educator and the student at the same time.

- II. Would maintaining clinical competency improve relationships between nursing education and nursing service?

- A. nursing service often sees education in a vacuum and not educating students for the actual practice setting.

- B. observing and working with nurse educators in practice, adds an element of validity and relevance to the educational process from the practice perspective.

Differing viewpoint practice should be expecting to fine tune a graduates' education upon employment. No program is able to educate for "the state of the art" when technology is moving at an accelerated pace, not seen since World War II.

- III. Would having Minimum Standards address clinical competency ensure continued professional growth of faculty?

- A. there is no tracking of professional development or clinical updating at this time in Minimum Standards. It is an expectation that all nurse educators are competent in both the classroom and the clinical area.

- B. the Board of Nursing is charged with the protection of the public. This includes the public as consumer of patient care and the public as consumer of nursing education. In keeping with this tenet, the currency of clinical competence is a grave concern for members of the Board.

VISIT WITH VADA
CONTINUED

- C. the outcomes of nursing programs are the cognitive, affective and psychomotor abilities of graduates. Nursing students look to their instructors to be their "M & Ms" (models and mentors). If the clinical competency of instructors wane, how long will it be before graduate outcomes reflect the competency of the mentor? Student expectations to succeed and be prepared to enter practice will be impacted by what they perceive to the quality of their mentors. Adult students of today, speak out when they perceive the quality of their education to be diminished and equate that to an instructor who is no longer clinically competent. The Board is acutely aware of the corollary actions of students who believe this to be the situation.
- B. should clinical professional development be directly related to the faculty persons' area of clinical responsibility? It would seem that if the concerns expressed earlier are valid, then professional development in the form of course work, workshops, seminars and practice would be most exhibited in the area of clinical responsibility.

Differing viewpoint the nurse educator must have the freedom to select any type of professional development they are interested in. Restricting selection to the areas of clinical responsibility, limit the choices for nurse educators.

Again, I do not have the answers, I only pose the questions. These concerns are of enough significance, that all of nursing education needs to ponder the solutions. The age old response of "Oh, well, that's the way it is", will no longer suffice. Schools need to decide how they can assist faculty to develop plans that will ensure their clinical competency. Employment policies may include professional development clauses for continued employment and the flexibility to implement those plans. The concerns are not only the concerns of a regulatory agency, but are the concerns of schools.

MESSAGE FROM THE BOARD OF NURSING
REGARDING CONTINUING EDUCATION

From time to time questions relative to continuing education arise - should it be mandatory? Should it be voluntary? What is acceptable content? What is enough? Those issues remain controversial to sufficient extent that the Board of Nursing has no immediate plans to initiate legislation and/or rules and regulations to alter the current voluntary status.

The Board of Nursing believes it is mandatory for all licensed nurses to be responsible for obtaining knowledge and skills required to keep them current and safe as practitioners. It is a professional responsibility that all nurses must accept at the time of licensure and one that must be taken very seriously. The well being of patients depends on it as does your professional career.

BOARD DECISIONS - EDUCATION SECTION
JANUARY 1990 BOARD MEETING

<u>FACILITY/INSTITUTION</u>	<u>REQUEST</u>	<u>DECISION</u>
LINCOLN UNIVERSITY (Ft. Wood Satellite)	INTERIM VISIT REPORT	APPROVED WITH RECOMMENDATIONS
JEWISH HOSPITAL	ACCREDITATION SURVEY RESPONSE	APPROVED
DEACONESS BSN	CLARIFICATION OF CURRICULUM CHANGE	APPROVED
HANNIBAL AVTS P.N.	ACCREDITATION SURVEY RESPONSE	APPROVED
COLUMBIA COLLEGE	CURRICULUM CHANGES	APPROVED
JOPLIN P.N.	ADDITIONAL CLINICAL FACILITIES	APPROVED CONTINGENT UPON SATISFACTORY PAPER SURVEYS
NICHOLS CAREER CENTER P.N.	ACCREDITATION SURVEY RESPONSE	APPROVED
CENTRAL MISSOURI STATE UNIVERSITY BSN	ADDITIONAL CLINICAL FACILITIES	APPROVED CONTINGENT UPON SATISFACTORY PAPER SURVEYS AS NEEDED
RESEARCH COLLEGE BSN	ACCREDITATION SURVEY RESPONSE	APPROVED
ST. LOUIS COMMUNITY COLLEGES	CURRICULUM CHANGES	APPROVED
PARK COLLEGE (Sikeston Campus)	INTERIM SURVEY RESPONSE	APPROVED
CAPE GIRARDEAU P.N.	CONSULTATION REPORT	APPROVED
PLATTE AVTS P.N.	ADDITIONAL CLINICAL FACILITY	APPROVED CONTINGENT UPON RECEIPT OF ONE (1) NURSING PROCEDURE
PENN VALLEY	PROGRAM TITLE CHANGE	APPROVED
PENN VALLEY	ADDITIONAL CLINICAL FACILITIES	APPROVED
PENN VALLEY	CURRICULUM CHANGES	APPROVED
PENN VALLEY	ONE TIME STUDENT ENROLLMENT INCREASE	APPROVED CONTINGENT UPON EVIDENCE ADEQUATE FACULTY

OF

JANUARY 1990 BOARD MEETING DECISIONS - EDUCATION SECTION
CONTINUED

<u>FACILITY/INSTITUTION</u>	<u>REQUEST</u>	<u>DECISION</u>
LUTHERAN MEDICAL CENTER	ACCREDITATION SURVEY RESPONSE	APPROVED
KENNETT AVTS P.N.	ACCREDITATION SURVEY RESPONSE	APPROVED
PLATTE AVTS P.N.	ADDITIONAL CLINICAL FACILITIES	APPROVED CONTINGENT UPON RECEIPT OF SATISFACTORY PAPER SURVEYS AS NEEDED
ST. LUKE'S HOSPITAL	CLARIFICATION OF RETENTION REQUIREMENTS	APPROVED
SOUTHWEST MISSOURI STATE UNIVERSITY-WEST PLAINS	INCREASED STUDENT ENROLLMENT	APPROVED CONTINGENT UPON SATISFACTORY SITE SURVEY OF CLASSROOMS
MISSOURI WESTERN STATE	CHANGE TO FULL ACCREDITATION STATUS	APPROVED WITH RECOMMENDATIONS
STATE FAIR COMMUNITY COLLEGE COLLEGE P.N.	INCREASED STUDENT ENROLLMENT	APPROVED
EAST CENTRAL COLLEGE	ADDITIONAL CLINICAL FACILITY	APPROVED CONTINGENT UPON RECEIPT OF COPY OF CONTRACT
KANSAS CITY BOARD OF EDUCATION P.N.	INCREASED STUDENT ENROLLMENT AT THEIR SHALOM SITE	APPROVED CONTINGENT UPON SATISFACTORY CLASSROOM SITE SURVEY
KANSAS CITY BOARD OF EDUCATION P.N.	CURRICULUM CHANGES	APPROVED CONTINGENT UPON CLARIFICATION OF HOURS IN BIOLOGY 108 AND EVIDENCE OF CORRECTED TRANSCRIPT
THREE RIVERS COMMUNITY COLLEGE ADN	ACCREDITATION SURVEY RESPONSE	APPROVED
THREE RIVERS COMMUNITY COLLEGE ADN	INCREASED STUDENT ENROLLMENT	APPROVED
ST. LOUIS COMMUNITY COLLEGE AT FLORISSANT VALLEY	FACULTY APPOINTMENT	APPROVED
PENN VALLEY	FACULTY APPOINTMENT	APPROVED
POPLAR BLUFF P.N.	ACCREDITATION SURVEY RESPONSE	APPROVED AND REQUESTS SUBMISSION OF "PLAN FOR ACQUISITION"

JANUARY 1990 BOARD MEETING DECISIONS - EDUCATION SECTION
CONTINUED

<u>FACILITY/INSTITUTION</u>	<u>REQUEST</u>	<u>DECISION</u>
NORTHEAST MISSOURI STATE UNIVERSITY BSN	CLARIFICATION OF ACCREDITATION SURVEY RESPONSE	APPROVED

<u>NAME OF NURSING PROGRAM</u>	<u>ANNUAL APPLICATION FOR CONTINUED ACCREDITATION</u>	<u>APPROVED WITHOUT RECOMMENDATIONS</u>
ST. LUKE'S COLLEGE OF NURSING BSN PROGRAM	"	"
ST. LOUIS UNIVERSITY BSN PROGRAM	"	"
N.S. HILLYARD TECHNICAL SCHOOL P.N. PROGRAM	"	"
CULVER-STOCKTON COLLEGE AND BLESSING- RIEMAN COLLEGE OF NURSING BSN	"	"
WARRENSBURG AVTS P.N.	"	"
KIRKSVILLE AVTS P.N.	"	"
STATE FAIR COMMUNITY COLLEGE P.N. PROGRAM	"	"
CAPE GIRARDEAU P.N.	"	"
KANSAS CITY BOARD OF EDUCATION P.N. PROGRAM	"	"
POPLAR BLUFF AVTS P.N.	"	"
PLATTE COUNTY AVTS P.N.	"	"
NICHOLS CAREER CENTER P.N.	"	"
MISSOURI BAPTIST MEDICAL CENTER	"	"
ST. JOHN'S SCHOOL OF NURSING	"	"
SIKESTON AVTS P.N.	"	"
ST. LUKE'S HOSPITAL SCHOOL OF NURSING	"	"
AVILA COLLEGE BSN PROGRAM	"	"
MOBERLY AREA JUNIOR COLLEGE ADN	"	"
CROWDER COLLEGE ADN	"	"
THREE RIVERS COMMUNITY COLLEGE ADN	"	"
SOUTHWEST MISSOURI STATE UNIVERSITY WEST PLAINS CAMPUS - ADN	"	"

<u>NAME OF NURSING PROGRAM</u>	<u>ANNUAL APPLICATION FOR CONTINUED ACCREDITATION</u>	<u>APPROVED WITH RECOMMENDATIONS</u>
WAYNESVILLE AVTS P.N.	"	"
MOBERLY AREA JUNIOR COLLEGE P.N. PROGRAM	"	"
COLUMBIA AREA HEALTH OCCUPATIONS CENTER P.N. PROGRAM	"	"
U.S. DEPARTMENT OF THE ARMY	"	"
HANNIBAL AVTS P.N. PROGRAM	"	"
NEVADA P.N. PROGRAM	"	"
JOPLIN P.N. PROGRAM	"	"

JANUARY 1990 BOARD MEETING DECISIONS - EDUCATION SECTION
CONTINUED

<u>NAME OF</u> <u>NURSING PROGRAM</u>	<u>ANNUAL APPLICATION FOR</u> <u>CONTINUED ACCREDITATION</u>	<u>APPROVED WITH</u> <u>RECOMMENDATIONS</u>
KENNETT AVTS P.N. PROGRAM	"	"
SOUTHCENTRAL AVTS P.N.	"	"
ROLLA AVTS P.N.	"	"
SALINE COUNTY CAREER CENTER P.N. PROGRAM	"	"
ST. LOUIS BOARD OF EDUCATION P.N. PROGRAM	"	"
ST. CHARLES COUNTY COMMUNITY COLLEGE P.N. PROGRAM	"	"
BOONSLICK AVTS P.N. PROGRAM	"	"
OMAR GIBSON AVTS P.N. PROGRAM	"	"
NORTH CENTRAL MISSOURI COLLEGE P.N.	"	"
NORTHWEST MISSOURI AVTS P.N.	"	"
MINERAL AREA COLLEGE P.N.	"	"
PIKE/LINCOLN AVTS P.N.	"	"
JEFFERSON COLLEGE P.N.	"	"
MEXICO PUBLIC SCHOOLS P.N.	"	"
EAST CENTRAL COLLEGE ADN	"	"
DEACONESS COLLEGE ADN	"	"
LINCOLN UNIVERSITY ADN	"	"
MARYVILLE COLLEGE BSN	"	"
WILLIAM JEWELL COLLEGE BSN	"	"
MISSOURI SOUTHERN STATE COLLEGE ADN	"	"
HANNIBAL-LAGRANGE ADN	"	"
JEFFERSON COLLEGE ADN	"	"
PENN VALLEY COMMUNITY COLLEGE ADN	"	"
CENTRAL METHODIST COLLEGE ADN	"	"
BARNES HOSPITAL SCHOOL OF NURSING	"	"
JEWISH HOSPITAL SCHOOL OF NURSING	"	"
BURGE SCHOOL OF NURSING	"	"
DEACONESS COLLEGE DIPLOMA PROGRAM	"	"
ST. LOUIS COMMUNITY COLLEGE AT FOREST PARK	"	"
MISSOURI WESTERN STATE COLLEGE BSN	"	"
DEACONESS COLLEGE BSN	"	"
CENTRAL MISSOURI STATE UNIVERSITY BSN PROGRAM	"	"
NORTHEAST MISSOURI STATE UNIVERSITY BSN PROGRAM	"	"
LUTHERAN MEDICAL CENTER SCHOOL OF NURSING	"	"
WASHINGTON AVTS P.N. PROGRAM	"	"
NORTH CENTRAL MISSOURI COLLEGE ADN PROGRAM	"	"
COLUMBIA COLLEGE ADN	"	"
PARK COLLEGE	"	"
STATE FAIR COMMUNITY COLLEGE ADN	"	"
ST. LOUIS COMMUNITY COLLEGE AT MERAMEC	"	"
MINERAL AREA COLLEGE ADN	"	"
ST. CHARLES COUNTY COMMUNITY COLLEGE ADN	"	"

JANUARY 1990 BOARD MEETING DECISIONS - EDUCATION SECTION
CONTINUED

<u>NAME OF NURSING PROGRAM</u>	<u>ANNUAL APPLICATION FOR CONTINUED ACCREDITATION</u>	<u>APPROVED WITH RECOMMENDATIONS</u>
SOUTHEAST MISSOURI STATE UNIVERSITY ADN PROGRAM	"	"
SOUTHEAST MISSOURI STATE UNIVERSITY BSN PROGRAM	"	"
UNIVERSITY OF MISSOURI - COLUMBIA BSN PROGRAM	"	"
RESEARCH COLLEGE OF NURSING BSN	"	"
ST. LOUIS COMMUNITY COLLEGE AT FLORISSANT VALLEY	"	"
BARNES COLLEGE OF NURSING BSN	"	"
SPRINGFIELD BOARD OF EDUCATION P.N. PROGRAM	"	"
SOUTHWEST MISSOURI STATE UNIVERSITY BSN PROGRAM	"	"

JANUARY, 1990 BOARD MEETING DECISIONS - LPN/IV THERAPY

<u>NAME OF FACILITY</u>	<u>REQUEST</u>	<u>DECISION</u>
DR INTRAVENOUS THERAPY CONSULTING, INC.	ADDITIONAL TRAINING FACILITY	APPROVED
PARK LANE MEDICAL CENTER	ADDITIONAL TRAINING FACILITY	APPROVED
WARRENSBURG AVTS LPN/IV THERAPY COURSE	INSTRUCTOR APPOINTMENT	APPROVED
CASS COUNTY MEDICAL CENTER	PROPOSAL TO INITIATE LPN/IV THERAPY COURSE	APPROVED

MESSAGE FROM MELINDA
MELINDA DOLAN SANDERS, R.N., M.S.N.
DISCIPLINE COORDINATOR

EVALUATION AND TREATMENT OF CHEMICAL DEPENDENCY

This is the third in a series of articles pertaining to the issue of chemically dependent nurses. In the past issues, identification of the chemically impaired nurse and intervention have been discussed. The focus of this issue is on evaluation and treatment of the chemically dependent nurse.

The goal of an intervention conducted on a nurse suspected of alcohol and/or other drug abuse is evaluation. There probably is no other piece to recovery that is more important than the evaluation. Because you will expect the nurse to follow the recommendations from this evaluation, you need to know ahead of time that the evaluator is reputable and skilled in performing chemical dependency evaluations.

The typical chemical dependency evaluation assesses substance use, medical and psychiatric histories, legal problems, family and social situations, and employment history. This process may be conducted by a qualified health care professional over a brief period of time (1 to 2 hours) utilizing interview techniques, or requires a 3 to 4 day hospitalization where a team of health professionals performs a variety of psychological tests to accurately diagnose the nurse involved. Upon completion of the process, the evaluator(s) provides the nurse with objective reality and recommendations.

If the nurse involved is found to be chemically dependent, the typical recommendation would be completion of a detoxification and/or rehabilitation program specifically designed for chemically dependent persons. The type and length of treatment will vary from facility to facility. However, effective treatment programs will stress the importance of abstinence from all mood-altering drugs, attendance at appropriate 12-step meetings, include the family, and provide individualized treatment.

Deciding which treatment facility to utilize can be a complex issue. Today there are a number of programs to choose from, each offering what they feel to be the best formula for chemical dependency treatment. Some facilities offer special programs for impaired health care providers, while others incorporate the needs of the impaired health professional in individual therapy.

The treatment program usually consists of group and individual therapy. Group therapy sessions cover such topics as alcohol and drug education, health education, self-help groups, educational tapes and films, family dynamics, recreational therapy, and issues surrounding recovery for special groups (i.e. a women's group). In-patient programs traditionally were designed for a minimum of 28 days. Recently, the length of in-patient programs has been related to the amount of coverage provided by the third-party payer (approximately 14 to 21 days).

One key factor in determining the appropriate treatment program is cost. Even with the help of insurance, the remaining balance the nurse is responsible for can be quite expensive. The Missouri Division of Alcohol and

MESSAGE FROM MELINDA
CONTINUED

Drug Abuse provides state-funded in-patient and out-patient treatment programs that are available on a sliding scale fee basis throughout the state. For more information on these programs, call 314-751-4942.

As a result of the escalating costs of chemical dependency treatment, alternatives to traditional in-patient treatment have been explored. One of these alternatives is intensive out-patient care. These programs are generally less costly than in-patient care and consist of individual and group therapy sessions lasting several hours 2 to 7 days per week for 4 to 8 weeks. This type of program may be the most practical for single women with children who would otherwise need to find someone to care for their children for 14 to 28 days. Some nurses have attended this form of treatment because it allowed them to work while in treatment. The decision to permit this type of treatment and possibly work must be mutually agreed upon by the evaluator, employer and the nurse involved.

Often times people consider in-patient chemical dependency treatment to be a "cure", when actually the steps to recovery are just beginning. Chemical dependency treatment is a process. The treatment process begins with the intervention and develops into an individualized recovery program which the nurse must follow for the rest of his/her life.

In the next issue of the Newsletter, I will discuss the role the employer plays in preparing the nurse for discharge from chemical dependency treatment and the issues surrounding the nurse's return to work.

If you or your group are interested in a presentation on chemical dependency in nursing, please contact me at 314-751-0070.

NOTE TO EMPLOYERS OF DISCIPLINED LICENSEES

The Missouri State Board of Nursing requires almost every disciplined nurse to submit an evaluation of their nursing practice completed by their employer. Generally the evaluation is to be sent to the Board office twice per year. The Board office sends the nurse the evaluation form several months in advance, and it is the nurse's responsibility to provide his/her employer sufficient time to complete the form and return it to the Board office.

Over the past few months, the Board has noted an increase in the number of disciplined nurses that fail to have this form in the Board office by the established date. While many of the nurses are in full responsibility for this delay, others have expressed great difficulty in getting their employer to complete the required evaluation form.

The Employer Evaluation form provides the Board members and staff valuable information on the disciplined nurses. Problem areas such as absenteeism, tardiness, controlled substance discrepancies, poor relationships with peers and use of mood-altering chemicals could go unknown to the Board if the employer evaluations were not required or returned.

NOTE TO EMPLOYERS OF DISCIPLINED LICENSEES
CONTINUED

At their January, 1990 meeting, the members of the Board of Nursing decided they would no longer accept documents that are not received by the required date. The disciplined nurse will be held totally responsible for seeing that all required documentation is received in the Board office in a timely fashion. If the documents are delayed, the nurse could face further discipline on his/her license. Therefore, the members of the Board and the disciplined nurses would and do appreciate your prompt attention in completing this essential documentation.

If you have any questions regarding this information, please contact Melinda Sanders at 314-751-0070.

EMPLOYERS PLEASE NOTE

The problem of nurse imposters remains on the increase state-wide and nationally. One way these people have impostered themselves is by possessing a photocopy of a nursing license, which for some has been obtained from the office of the Director of Nursing.

The Joint Commission on Accreditation of Healthcare Organizations recently clarified their requirements for verification of licensure as part of a healthcare facility's verification procedure. THEY DO NOT REQUIRE A PHOTOCOPY OF LICENSES IN THE PERSONNEL FILES OF LICENSED NURSES. What they do require is that your facility have a system for licensure verification and that it be implemented on a regular basis.

The Board of Nursing suggests you always demand to see the original license of a licensed nurse employee or applicant, note the license number and expiration date, and verify the information on the employment application of a nurse by telephoning or writing the Board office at 314-751-0681. Documenting this procedure in each nurse applicant's file is sufficient to satisfy the Joint Commission on Accreditation of Healthcare Organizations.

If you must photocopy licenses for your files, please be sure to write or stamp COPY on the photocopy. It is also vital that you control who has access to the photocopied licenses. I would suggest only a limited number of licensed nurses should have access to these licenses for the protection of the nurses and your facility.

If you need further information, please contact Melinda Sanders at 314-751-0070, or Carole H. Patterson at 312-280-7866.

DISCIPLINARY HEARINGS
JANUARY 9 - 11, 1990

- PN029537 - Order dated January 18, 1990, Revoked.
Violation of terms of Order dated February 22, 1988.
- PN032481 - Order dated January 18, 1990, Revoked.
Violated terms of Consent Agreement dated August 8, 1989.
- PN035190 - Consent Agreement dated February 14, 1990. Inactive until such time licensee presents evidence sufficient to demonstrate to the Board that the licensee can safely practice nursing.
Licensee began suffering from depression and consulting various doctors. Licensee also misappropriated Tylenol #4 from the employer for self use.
- RN060815 - Order dated January 19, 1990, Revoked, two years, Probation until January 19, 1992. This discipline temporarily stayed by the St. Louis County Circuit Court.
While employed as an R.N., the licensee misappropriated Demerol for self-administration and also took a patient who had been admitted to the critical care unit less than 24 hours earlier with a diagnosis of myocardial infarction off the unit without a physician's orders or monitor. Licensee was terminated from this facility.
- RN081063 - Order dated January 18, 1990, Revoked.
Violated disciplinary agreement of April 19, 1989.
- RN093729 - Order dated February 5, 1990, Revoked, Revocation Stayed, Probation until August 5, 1991.
Licensee violated terms of probation set by Board on August 3, 1987.
- RN097990 - Order dated January 18, 1990, Revoked.
Violated Consent Agreement of January 28, 1987.
- RN103754 - Order dated January 18, 1990, Revoked.
Violation of terms of Consent Agreement dated May 19, 1989.

PROBATION COMPLETED

<u>NAME</u>	<u>LICENSE NUMBER</u>
Carolyn Bratcher	PN024561
Cynthia Salas	PN031085
Robert Forrest	PN035176
Josephine Warren	PN035933
James Aschbacher	RN074628
Janet Reynaud	RN076580
Linda DeWitt Dittmer	RN078948
Karen Lukefahr	RN079612
Sandra Morton	RN086593
Becky Daniel	RN089193
Kevin Spera	RN091153
Bryan Kumm	RN095976
Sheila Marie Bifford Tucker	RN103778

EMPLOYER ALERT

THE FOLLOWING INDIVIDUALS HAVE NEVER HELD A MISSOURI NURSING LICENSE

JAMES MERKLEY

MARY ANN HUDSON

LOIS HODSON

TRACEY L. TRUMAN STEIN

ROSIE MAE HARRIS IRONS

DISCIPLINARY ACTION
TAKEN BY THE BOARD

- PN014937 - Consent Agreement dated January 4, 1990, Revoked, Revocation Stayed, Probation for two (2) years until January 4, 1992.
- While employed as an L.P.N., licensee removed written prescriptions from patient files and attempted to fill them for her own use. One prescription was for Tylenol #3 and one for Percodan.
- PN015791 - Consent Agreement dated February 26, 1990, Revoked, Revocation Stayed, Probation for two (2) years until February 26, 1992.
- While employed as an L.P.N. at a long term care facility the licensee was terminated for neglect of a patient and inadequate documentation of medical records.
- PN019806 - Consent Agreement dated December 21, 1989, voluntary surrender of license.
- Licensee entered into an Agreement with the Board for discipline on March 14, 1988. This Agreement was entered because the licensee is chemically dependent. Licensee was non-compliant with this Agreement and agreed to surrender of the Missouri L.P.N. license.
- PN022713 - Order dated February 7, 1990. Suspension stayed. Probation for three (3) years until February 7, 1993.
- While employed as an L.P.N. licensee forged or caused to be forged medical prescriptions in order to obtain Demerol for self use.
- PN023671 - Consent Agreement dated February 26, 1990. Inactive for at least two (2) years - February 26, 1992.
- Licensee transferred from an L.P.N. to pharmacy technician and misappropriated cocaine from the pharmacy.
- PN028433 - Consent Agreement dated January 8, 1990, Revoked, Revocation Stayed, Probation for two (2) years until January 8, 1992.
- Licensee became dependent on Fiorinol #3 and began abusing Fiorinol #3 by asking various doctors for prescriptions for Fiorinol #3.

DISCIPLINARY ACTION, CONTINUED

- PN028705 - Consent Agreement dated March 13, 1990. Revoked.
Licensee's L.P.N. license revoked in Kentucky for switching the records and photographs of residents in a long term care facility and moving residents from their proper location.
- PN029680 - Consent Agreement dated January 4, 1990. Revoked, Revocation Stayed, probation for one (1) year until January 4, 1991.
Licensee took Fiorinol #3 and Valium prior to going on duty as an L.P.N. The Fiorinol #3 and Valium impaired the licensee's ability to function as a nurse by causing the licensee to make numerous documentation errors, to have slurred speech and to be incoherent at times.
- PN031266 - Consent Agreement dated January 24, 1990, Revoked, Revocation Stayed, probation until May 27, 1992.
Licensee was under previous disciplinary Agreement. Licensee failed to attend the Fall 1988 Board meeting. Licensee failed to attend the Spring 1989 Board meeting and failed to provide documentation, all in violation of the previous Agreement.
- PN037953 - Consent Agreement dated February 26, 1990, Revoked, Revocation Stayed, Suspended until August 26, 1990, Probation until August 26, 1992.
While on duty as an L.P.N., licensee used illegal street drugs.
- PN042586 - Consent Agreement dated February 26, 1990, Probation until February 26, 1992.
Licensee indicated history of chemical dependency on the application for licensure as an L.P.N. by endorsement.
- PN040408 - Consent Agreement dated February 26, 1990, Revoked, Revocation stayed, Probation until February 26, 1992.
Licensee has been involved in three alcohol related traffic incidents indicating impairment resulting from the use of

DISCIPLINARY ACTION, CONTINUED

alcohol.

- RN048257 - Consent Agreement dated March 13, 1990, Voluntary Surrender of License.

Licensee entered into a disciplinary agreement with the Board of Nursing on January 12, 1988. Licensee failed to comply with the requirements of this agreement and voluntarily surrendered the R.N. license.

- RN051045 - Consent Agreement dated January 19, 1990, Probation until January 19, 1992.

Applicant applied to the Missouri State Board of Nursing for renewal of an inactive R.N. license. Applicant indicated a history of misappropriation of Fentanyl for self-administration. Applicant was allowed to renew R.N. license. Immediately upon renewal of the R.N. license applicant was placed on probation for two years.

- RN056488 - Consent Agreement dated February 15, 1990, Revoked, Revocation Stayed, Probation until February 15, 1993.

While employed as an R.N., licensee misappropriated Demerol for self-administration. Licensee was placed under a Plan for Improvement which prohibited the administration of narcotics. While under the Plan for Improvement, licensee administered Tylenol to a patient and asked for keys to the narcotic cabinet. While under Plan for Improvement licensee misappropriated Demerol for self-administration. Licensee was terminated for violation of Plan for Improvement.

- RN082672 - Settlement dated January 16, 1990, Revoked, Revocation Stayed, Probation until January 16, 1992.

While employed as an R.N. licensee falsified patient records by charting that patient assessments had been done when they had not, allowed an in-house patients condition to deteriorate, failed to properly chart such change in condition and failed to report the change in condition to the physician. Licensee also failed to notify the physician after re-intubating a ventilator patient who had extubated himself, failed to take action to prevent potential injury to mother and/or infant upon delivery of the infant's head while present at a vaginal delivery, made three medication errors, falsified the employment application by withholding two recent employers, repeatedly was noted to be asleep on duty and failed to maintain good personal hygiene and a professional appearance.

DISCIPLINARY ACTION, CONTINUED

RN085035 - Consent Agreement dated February 27, 1990, Revoked, Revocation Stayed, Probation until February 27, 1991.

While employed as and R.N. licensee engaged in improper conduct by contacting patients after discharge and asking them out on dates. The contacts were not requested or welcomed by the patients, some of whom were married.

RN088436 - Consent Agreement dated January 23, 1990, Revoked, Revocation Stayed, Probation until January 23, 1992.

Licensee entered into an agreement regarding discipline on their R.N. license August 22, 1988. On or about December, 1988 the licensee relapsed, used cocaine or alternatively, marijuana.

RN088610 - Consent Agreement dated February 13, 1990, Revoked.

Oklahoma license revoked due to diversion of Demerol from facility where employed.

RN091925 - Consent Agreement dated March 22, 1990, Revoked.

Licensee found guilty of three counts of neglect of a resident of a facility in the circuit court. Licensee was sentenced to imprisonment for five years on each of three counts, to run concurrently. The Supreme Court of Missouri upheld the conviction on all counts.

RN092973 - Consent Agreement dated February 15, 1990, Revoked, Revocation Stayed, Probation until February 15, 1992.

While employed as an R.N. licensee misappropriated Demerol, Percocet, Morphine, Tylenol #3, Darvon and Darvocet from hospital stock for self-administration. Licensee failed to properly document the administration of narcotics to patients.

RN095394 - Consent Agreement dated March 13, 1990, Revoked, Revocation Stayed, Probation until completes discipline in Kansas.

Licensee's Kansas R.N. license was disciplined by limiting it for a period of eighteen months. This action resulted from allegations that the licensee diverted Demerol and falsified patient records to conceal diversion from the employer.

RN096449 - Consent Agreement dated January 24, 1990, Revoked, Revocation Stayed, Suspended until July 24, 1990, Probation until July 24,

DISCIPLINARY ACTION, CONTINUED

1993.

Unlawful possession of controlled substances.

RN097945 - Consent Agreement dated January 8, 1990. License placed on inactive status for two years. Then must request permission from the Board to reactivate license. Followed by two years probation.

Licensee underwent brain surgery. As a result of the condition and surgery, the licensee's ability to function as a nurse has been impaired during the subsequent rehabilitation.

RN099683 - Consent Agreement dated February 13, 1990, Revoked, Revocation Stayed, Probation until February 13, 1992.

In summer of 1989 while employed as an R.N., licensee misappropriated and self-administered Demerol.

RN101324 - Consent Agreement dated March 7, 1990, Voluntary Surrender of License.

While employed as an R.N., licensee administered Demerol to a patient. Licensee was under an EAP Agreement that forbade possession of narcotics or narcotic keys at any time under any circumstances. Licensee's administration of Demerol to a patient was a violation of the employment contract. Licensee voluntarily surrendered license.

RN102711 - Consent Agreement dated March 22, 1990, Revoked, Revocation Stayed, Probation until March 22, 1992.

While employed as an R.N., licensee charted vital signs of patient, which were very abnormal, but did not notify the physician on call or the supervisor of patient's condition.

RN104403 - Consent Agreement dated February 21, 1990, Revoked.

While employed as an R.N., at more than one employer, licensee failed to properly document waste of narcotics, failed to properly sign out controlled substances, failed to properly document the administration of controlled substances. Licensee misappropriated Demerol for self-administration.

RN107069 - Consent Agreement dated January 31, 1990, Revoked, Revocation Stayed, Suspended until January 31, 1991, Probation until January 31, 1994.

While employed as an R.N., the licensee misappropriated Demerol

DISCIPLINARY ACTION, CONTINUED

from hospital supplies for self-administration.

RN112596 - Consent Agreement dated March 22, 1990, Revoked, Revocation Stayed, Probation until March 22, 1993.

Licensee failed to comply with disciplinary agreement of May 18, 1989 by failing to provide the required documentation.

POLICY OF THE BOARD

According to RSMo, 620.140 the Board of Nursing may charge a \$25.00 penalty fee in addition to the licensure fee to cover processing of uncollectable instruments. Uncollectables may be personal checks, money orders, and cashier's checks. If a licensee calls/writes our office to inform us of an uncollectable, and the certified letter notifying the licensee of the uncollectable has not been mailed to the licensee from this office, then the \$25.00 penalty fee can be waived.

After a telephone call to licensee from this office about the uncollectable and ten working days has lapsed, then the certified letter can be sent and the \$25.00 fee charged.

The Board does have statutory authority to suspend or revoke a license if the licensee fails to pay the required penalty fee.

SUMMARY OF DISCIPLINARY ACTION TAKEN
BY THE MISSOURI STATE BOARD OF NURSING

NAME	TYPE	NUMBER	ACTION	EFFECTIVE DATES
Allen, Alicia	LPN	040275	Revoked	11/30/89
Aschbacher, James	RN	074628	Suspended	06/23/86 to 12/23/86
			Probation	12/23/86 to 12/23/89
Barnes, Diane	RN	096192	Probation	11/12/87 to 11/12/91
Barnhurst, Katherine	LPN	037886	Lapsed	File Flagged
Bartee, Kathleen K.	RN	088610	Revoked	02/13/90
Bell, Vivian	PN	042586	Probation	02/26/90 to 02/26/92
Benedict, Deborah	LPN	030814	Probation	01/28/88 to 01/28/91
Bennett, Cynthia	RN	074728	Revoked	10/14/88
Blossom, Mau	RN	062344	Probation	05/18/88 to 05/19/92
Boone, Nancy Diane Hatton	LPN	040408	Probation	02/26/90 to 02/26/92
Borroum, Alice Brown	LPN	009993	Probation	11/08/89 to 11/08/92
Bower, Evelyn	LPN	028227	Probation	04/05/88 to 04/05/90
Boyer-Hottinger, Pamela Sue	N/A	N/A	Not Licensed	XXXXXXXXXXXXXXXXXXXX
Brainer, Janice	RN	111990	Probation	03/09/89 to 03/09/91
Bratcher, Carolyn Brink	LPN	024561	Probation	02/09/88 to 02/09/90
Brombolich, Mary	RN	072821	Suspended	07/01/87 to 01/01/88
			Probation	01/01/88 to 01/01/91
Brown, Janice	RN	061847	Probation	08/22/88 to 08/22/90
Buckner, Linda	RN	068342	Revoked	10/14/88
Buese, Marci	RN	092973	Probation	02/15/90 to 02/15/92
Burgoyne, Richard	RN	099704	Probation	02/10/88 to 02/10/91
Carleton, Martha	RN	082672	Probation	01/16/90 to 01/16/92
Carrier, Velma Ruth	LPN	035635	Revoked	09/13/89
Carter, Geraldean	LPN	025574	Suspended	02/23/89 to 02/23/90
			Probation	02/23/90 to 02/23/92
Christeson, Katherine	LPN	035675	Revoked	07/19/89
Clark, Kimberly (Smith)	RN	079372	Revoked	07/19/89
Clark, Sue	RN	045475	Suspended	08/05/87 to 02/05/88
			Probation	02/05/88 to 02/05/91
Clay, Anna	LPN	018751	Revoked	10/20/89
Clossick, Thomas	LPN	037953	Suspended	02/26/90 to 08/26/90
			Probation	08/26/90 to 08/26/92
Cloud, Michael	LPN	035746	Probation	12/16/88 to 12/16/90
Collins, Janice	N/A	N/A	Not Licensed	XXXXXXXXXXXXXXXXXXXX
Cooper, Arthur	RN	085035	Probation	02/27/90 to 02/27/91
Crane, Rebecca Baxter	RN	101965	Probation	03/21/88 to 03/21/91
Crawford, Gloria J.	LPN	025303	Probation	One Year From Date Renewed
Crider, Rebecca	LPN	041314	Revoked	04/13/89
Cyprian, Glenda	RN	088436	Probation	01/23/90 to 01/23/92
Daniels, Becky	RN	089193	Probation	01/28/88 to 01/28/90
Dechant, Julie	RN	097261	Probation	07/28/89 to 07/28/94
Deren, Tonia Sue	LPN	037134	Probation	12/14/88 to 12/14/90
DeWitt, Linda	RN	078948	Probation	01/28/87 to 01/28/90
Deyoe, Tari Ann	RN	112802	Probation	01/25/89 to 01/25/91
Dignan, Nancy	RN	100851	Revoked	01/30/89
Dowdell, Donna	RN	098666	Probation	09/02/88 to 09/02/91
Doyebi, Sherry	RN	109506	Probation	05/06/89 to 05/16/91

SUMMARY OF DISCIPLINARY ACTION, CONTINUED

<u>NAME</u>	<u>TYPE</u>	<u>NUMBER</u>	<u>ACTION</u>	<u>EFFECTIVE DATES</u>
Drury, Charlene J. Brackett	RN	105112	Suspended	11/06/86 to 05/06/87
			Probation	05/06/87 to 05/06/92
Dunlap, Robert Lee	LPN	036549	Probation	03/23/89 to 03/23/91
Eldridge, Raymond	RN	079239	Probation	08/22/88 to 08/22/90
Elliott, Robert H	RN	103754	Revoked	01/18/90
Embree, Jerry	RN	096160	Suspended	04/26/88 to 04/26/89
			Probation	04/26/89 to 04/26/91
Essary, Susan	LPN	022633	Probation	04/20/87 to 04/20/90
Evans, Deborah	RN	113249	Probation	08/28/89 to 08/28/92
Evans, Walter	RN	051045	Probation	01/19/90 to 01/19/92
Fanning, James	RN	112864	Probation	11/08/89 to 11/08/91
Farley, Mary Kathleen	RN	112887	Probation	08/25/89 to 08/25/91
Farrow, Michelle	RN	085540	Voluntary Surrender	09/13/88
Fetters, James	RN	101269	Suspended	07/27/88 to 07/27/89
			Probation	07/27/89 to 07/27/91
Fiscus, Mary Catherine	RN	087624	Probation	01/20/88 to 01/20/91
Fletcher, Mary Mitchell Morris	LPN	015791	Probation	02/26/90 to 02/26/92
Flavin, Rachael	RN	100614	Probation	03/23/89 to 03/23/91
Floyd, Carolyn	RN	084340	Revoked	04/13/89
Foster, Patti J.	LPN	032577	Revoked	07/21/89
Foulon, Thomas, Jr.	RN	069674	Probation	09/08/87 to 09/08/90
Fox, Beverly Ellerbrook	LPN	039413	Revoked	12/05/88
Fronick, Karen	RN	062553	Probation	10/30/87 to 10/30/90
Funk, Sherry	RN	093729	Probation	02/05/90 to 08/05/91
Gaffney, Tina	RN	084712	Suspended	09/22/87 to 09/22/88
			Probation	09/22/88 to 09/22/91
Gajewski, Ronald A.	RN	071505	Probation	02/05/88 to 02/05/91
Gawlas, Robert	RN	101324	Voluntary Surrender	03/22/90
Ghys, Barbara	RN	092759	Probation	12/05/88 to 12/05/90
Gray, Stuart	RN	111006	Probation	08/24/88 to 08/24/90
Guinn, Jeanette	RN	091925	Revoked	03/22/90
Haggard, Donald	LPN	02405	Revoked	01/23/89
Hodgson, Mary Ruth	RN	081533	Suspended	01/24/86 to 01/24/88
			Probation	01/24/88 to 01/24/91
Hodson, Lois	N/A	N/A	Not Licensed	XXXXXXXXXXXXXXXXXXXX
Hoffelt, Donald	RN	088650	Voluntary Surrender	05/03/89
Hoffman, Sandra	LPN	032816	Probation	08/22/88 to 08/22/90
(also Sandra Hoffman Schmoer)				
Holland, Gwendolyn**	RN	095077	Suspended	07/31/86 to 07/31/87
			Probation	07/31/87 to 07/31/90
Houle, Patricia	RN	111657	Probation	12/07/88 to 12/07/90
(also Patricia Anderson)				
Hudson, Mary Ann	N/A	N/A	Not Licensed	XXXXXXXXXXXXXXXXXXXX
Huffinan, Charles	RN	042981	Suspended	04/05/88 to 04/05/90
			Probation	04/05/90 to 04/05/93
Hunter, Maryan Al-Ghofoor*	N/A	N/A	Not Licensed	XXXXXXXXXXXXXXXXXXXX

SUMMARY OF DISCIPLINARY ACTION, CONTINUED

NAME	TYPE	NUMBER	ACTION	EFFECTIVE DATES
Irons, Rosie Mae Harris	N/A	N/A	Not Licensed	XXXXXXXXXXXXXXXXXXXX
Isaacs, Kelley	LPN	036243	Probation	02/01/89 to 02/01/91
Jackson, Sandra	RN	095394	Probation (see below) **	
Jessip, Roberta	LPN	029537	Revoked	01/18/90
Johnston, Deborah	LPN	029680	Probation	01/04/90 to 01/04/91
Jones, Judith Ann	LPN	039321	Probation	03/23/89 to 03/23/91
Kirn, Marilyn	LPN	035115	Lapsed License	
Kirschmer, Gisela	LPN	014937	Probation	01/04/90 to 01/04/92
Kuehn, Mabel	RN	059286	Revoked	04/13/89
Kuenker, Lisa	RN	064126	Suspended	07/18/88 to 07/18/89
			Probation	07/18/89 to 07/18/91
Land, Rhonda	LPN	016012	Suspended	07/25/89 to 01/25/90
			Probation	01/25/90 to 01/25/92
Lay, Alice	LPN	026858	Suspended	08/23/87 to 02/23/88
(also Alice Lay Glear)			Probation	02/23/88 to 02/23/91
Lawrence, Diane	LPN	022713	Probation	02/07/90 to 02/07/93
Leas, Jennifer Rittman	RN	069657	Probation	04/10/86 to 04/10/90
Lewenczuk, Marie	LPN	041342	Probation	12/30/88 to 12/30/90
Long, April	RN	058896	Probation	07/22/87 to 07/22/90
McClain, Nadene Helton	LPN	026753	Suspended	08/25/86 to 08/25/89
			Probation	08/25/89 to 08/25/92
McCleary, Augustine M.	LPN	028572	Suspended	02/03/89 to 11/03/89
			Probation	11/03/89 to 11/03/92
McConnack, Julie	RN	113996	Probation	08/21/89 to 08/21/91
McCroskey, Jack	RN	063334	Probation	02/22/89 to 02/22/91
McDaniel, Kerri Bernice	RN	112950	Probation	08/25/89 to 08/25/91
McIntosh, Faith	LPN	033421	Not Licensed	XXXXXXXXXXXXXXXXXXXX
Marti, Gloria Sue	LPN	011916	Suspended	02/09/88 to (*see below)
Mayfield, Elizabeth	RN	112949	Probation	08/21/89 to 08/21/91
Mayfield, Jennie	RN	109935	Probation	08/22/88 to 08/22/90
Mealey, Kathryn	RN	109586	Probation	07/28/89 to 07/28/91
Meehan, Beverly	RN	090059	Probation	09/21/87 to 09/21/90
Meredith, Judith Ann Duffy	LPN	028705	Revoked	03/13/90
Merkley, James	N/A	N/A	Not Licensed	XXXXXXXXXXXXXXXXXXXX
Messic-Shadwell, Rosemary	RN	079895	Probation	12/05/88 to 12/05/90
Miller, Barbara	RN	056488	Probation	02/15/90 to 02/15/93
Miller, Carol Ann	LPN	030405	Probation	04/16/87 to 04/16/90
(also Carol Miller Henson)				
Miller, Gregory	RN	066844	Revoked	10/13/88
Mitchell, Lavonda	LPN	032588	Revoked	01/30/89
Moix, Margie Dean	RN	043034	Voluntary Surrender	11/02/88
Morrow, William Jr.	RN	099683	Probation	02/13/90 to 02/13/92
Murdick, Janet	RN	096358	Probation	07/27/89 to 07/17/91
Murphy, Howard	RN	067285	Probation	01/12/88 to 01/12/91

* Until notification is received indicating license has been cleared in:
Marti, Gloria Sue . . . Florida

** On Probation until Probation in Kansas is completed.

SUMMARY OF DISCIPLINARY ACTION, CONTINUED

<u>NAME</u>	<u>TYPE</u>	<u>NUMBER</u>	<u>ACTION</u>	<u>EFFECTIVE DATES</u>
Notheis, Rose	RN	044744	Suspended	01/04/89 to 01/04/90
			Probation	01/04/90 to 01/04/93
Novinger, Patsy	RN	099815	Probation	04/25/88 to 04/25/90
Novinger, Patsy	LPN	016967	Probation	04/25/88 to 04/25/90
Orine, Margaret	RN	060586	Probation	03/23/89 to 03/23/91
Panzica, Jamie	RN	094651	Probation	08/13/87 to 08/13/90
Paradise, Maria	RN	103244	Revoked	04/13/89
Parker, Penny	RN	048257	Voluntary Surrender	03/13/90
Pearre, Pam	RN	082718	Probation	09/22/89 to 09/22/91
Perry, Andrew D	RN	108892	Suspended	08/08/89 to 02/08/90
			Probation	02/08/90 to 02/08/92
Pozywio, Sandra Lynn	RN	112596	Probation	03/22/90 to 03/22/93
Preston, Laura	LPN	035190	Inactive	02/14/90***
Priefer, Donnalee Misemer	N/A	N/A	Not Licensed	XXXXXXXXXXXXXXXXXX
Respress, Renee	RN	094740	Suspended	02/22/89 to 08/22/89
			Probation	08/22/89 to 08/22/91
Reynolds, Linda	RN	067157	Probation	06/09/88 to 06/09/90
Rhoads, Luella Fay	RN	091257	Probation	02/09/88 to 02/09/91
Rice-Swilling, Reneal	RN	070203	Probation	12/05/88 to 12/05/90
Richardson, Danita	RN	097945	Inactive (see below)	**
Rigby, Joan	RN	081253	Probation	03/24/88 to (*see below)
Riphey, Louise	RN	094421	Suspended	04/21/86 to 04/21/87
			Probation	04/21/87 to 04/21/90
Rodewald, Martha	RN	106176	Probation	12/07/88 to 12/07/90
Roelling, Sharon	RN	098019	Probation	02/17/89 to 02/17/91
Rothenheber, Mary Rose	LPN	019806	Voluntary Surrender	12/21/89
Rudd, Mary	LPN	037905	Revoked	10/20/89
Salas, Cynthia	LPN	031085	Probation	11/19/86 to 11/19/90
Sassi, Barbara	RN	092423	Revoked	05/01/89
Schuster, Thomas	RN	081284	Probation	09/11/87 to 09/11/90
Schwartz, Janice	RN	065512	Probation	02/23/89 to 02/23/91
Scroggins, John Perry	RN	091101	Suspended	01/28/88 to 01/28/91
			Probation	01/28/91 to 01/28/96
Searcy, Dick	RN	067578	Revoked	10/14/88
Semple, Deborah Ochoa	RN	078157	Suspended	10/08/86 to 10/08/87
			Probation	10/08/87 to 10/08/90
Shaffer, Kathleen	RN	081063	Revoked	01/18/90
Sharp, Marcelay	RN	098336	Suspended	10/05/87 to 04/05/88
			Probation	04/05/88 to 08/13/90
Sheppard, Ann Marie	RN	104403	Revoked	02/21/90
Shipman, John Walter	N/A	N/A	Not Licensed	XXXXXXXXXXXXXXXXXX
Shipp, Judith	RN	107069	Suspended	01/31/90 to 01/31/91
			Probation	01/31/91 to 01/31/94

*Until notification is received indicating license has been cleared in:
Rigby, Joan. Iowa

** License placed on Inactive status for two years, requires permission to reactivate, followed by two years probation.

*** Inactive until such time licensee presents evidence sufficient to demonstrate to the Board that the licensee can safely practice nursing.

SUMMARY OF DISCIPLINARY ACTION

<u>NAME</u>	<u>TYPE</u>	<u>NUMBER</u>	<u>ACTION</u>	<u>EFFECTIVE DATES</u>
Sides, Lela	LPN	028433	Probation	01/08/90 to 01/08/92
Siler, Donna M	LPN	032481	Revoked	01/18/90
Smith, Maryan**	N/A	N/A	Not Licensed	XXXXXXXXXXXXXXXXXXXX
Smith, Michael	LPN	031266	Probation	01/24/90 to 05/27/92
Spera, Kevin	RN	091153	Probation	02/09/88 to 02/09/91
Steadman, Wanda	RN	108873	Revoked	07/19/89
Steckel, Shari	RN	067804	Suspended	11/02/88
Stein, Tracey L. Truman	N/A	N/A	Not Licensed	XXXXXXXXXXXXXXXXXXXX
Stough, Barbara	RN	096449	Suspended	01/24/90 to 07/24/90
			Probation	07/24/90 to 07/24/93
Sturgis, Margaret	LPN	039198	Probation	08/10/89 to 08/10/91
Sullivan, Linda	N/A	N/A	Not Licensed	XXXXXXXXXXXXXXXXXXXX
Swartz, Marva	LPN	023671	Inactive until	02/26/92
Swiderski, Kathryn	RN	073398	Probation	06/15/88 to 06/15/90
Taylor, Clarissa	RN	060815	Revoked, two years -	
			Probation	to 01/19/92*
Thomas, Margaret	RN	103755	Suspended	09/22/89 to 09/22/92
			Probation	09/22/92 to 09/22/97
Thuman, Vera	RN	031037	Voluntary Surrender	03/10/89
Tiller, Lillie	RN	034770	Revoked	07/21/89
Topping, Mary Ann	RN	068533	Suspended	04/16/87 to 01/01/88
			Probation	01/01/88 to 04/16/91
Townzen, Bruce	RN	094940	Probation	12/14/88 to 12/14/90
Trankler, Glenda	RN	089685	Probation	11/16/89 to 11/16/91
Trichell, Elizabeth	RN	097990	Revoked	01/18/90
Tweedie, Carolyn Tidmus	N/A	N/A	Not Licensed	XXXXXXXXXXXXXXXXXXXX
Tye, Jennifer	RN	089127	Suspended	08/31/87 to 11/01/87
			Probation	11/01/87 to 08/31/91
Tyler, Alice D	LPN	028117	Suspended	03/23/89 to 03/23/90
			Probation	03/23/90 to 03/23/92
Urban, Anna Marie	RN	098700	Revoked	07/20/89
Utlaut, Sonja	RN	091251	Probation	12/05/88 to 12/05/90
Vanderent, Lori	LPN	037161	Suspended	12/20/88 to 12/20/90
			Probation	12/20/90 to 12/20/92
Vohsen, Sharon	RN	080052	Suspended	09/10/87 to 03/10/88
			Probation	03/10/88 to 03/10/91
Wagoner, Deborah Dee	N/A	N/A	Not Licensed	XXXXXXXXXXXXXXXXXXXX
Walden, James Adair	RN	92291	Probation	01/13/89 to 01/13/92
Warmboldt, Deborah	N/A	N/A	Not Licensed	XXXXXXXXXXXXXXXXXXXX

* This discipline temporarily stayed by the St. Louis County Circuit Court.

SUMMARY OF DISCIPLINARY ACTION, CONTINUED

<u>NAME</u>	<u>TYPE</u>	<u>NUMBER</u>	<u>ACTION</u>	<u>EFFECTIVE DATES</u>
Warren, Josephine	LPN	035933	Probation	03/04/88 to 03/04/90
Warrington, Susan	RN	054346	Revoked	10/14/88
Welch, Karen	RN	092069	Suspended	01/26/88 to 07/26/88
Williams, Dorothy	RN	083745	Probation	07/26/88 to 07/26/91
Williams, Gwendolyn (see Holland, Gwendolyn)	RN	056625	Revoked	10/14/88
Wolf, Kathleen Lane	RN	026831	Revoked	10/20/89
Womelduff, Sage	LPN		Suspended	03/14/88 to 09/14/88
Wood, Judy	RN	092715	Probation	09/14/88 to 09/14/91
Woodson, Beverly	RN	052230	Probation	11/08/88 to 11/08/90
Wrombel, Carolyn	RN	042224	Probation	11/02/88 to 11/02/90
Yocum, Paulette Lampkins	LPN	014956	Probation	11/20/89 to 11/20/91
Young, Suzanne	LPN	024328	Probation	05/28/89 to 05/28/91
Zacha, Kimberly Neighbors	N/A	N/A	Probation	12/16/88 *(see below)
			Not Licensed	XXXXXXXXXXXXXXXXXXXX

*Suzanne Young, LPN 024328 Until completion of probation with the Department of Corrections.

NOTICES OF INVALID LICENSES

As of April 17, 1990 the following individuals hold an invalid 1989-1990 nursing license; these individuals are not eligible to practice nursing in the State of Missouri.

<u>NAME</u>	<u>LICENSE #</u>
Cernak, Katherine	RN065445
Lacy, Leslie	RN045155
McGougall, Marilyn	PN039435
Rowe, Henrietta	PN039547
Tolin, Karen	RN099182
Wilson, Dawn	PN035846

IV THERAPY RULE

The Emergency Proposal was filed on December 4, 1989 and became effective on December 24, 1989. The comment period ended January 18, 1990. Seven comments were received. Final Order of Rulemaking was filed March 5, 1990 and became effective on March 26, 1990. The Board reviewed the IV Rule as filed on March 26, 1990 and changes will be made to the rule and appear in the Missouri Register.

DEFINITION OF ADVANCED PRACTICE

The Definition of Advanced Practice appeared in the March 16, 1990 issue of the Missouri Register. Comment period will end on April 16, 1990. Comments received on that Definition will be reviewed and any revisions will appear in the Missouri Register.

VOLUME XXXI ISSUE I

Missouri State Board of Nursing
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